PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2885

anarapriate All further o	correspondence including d below or directed oth	g the Patent advance of	rders and notification of a) specifying a new co	of mai	intenance fees wi ondence address;	li be r and/or	nailed to the current (b) indicating a separ	would be completed where correspondence address as rate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of address)					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.				
TOWNSEND AND TOWNSEND AND CREW, LLP TWO EMBARCADERO CENTER EIGHTH FLOOR					Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.				
SAN FRANCISO	ſ					(Depositor's name)			
			ľ					(Signature)	
			ł					(Date)	
APPLICATION NO.	N NO. FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.		
10/782.751	10/782.751 02/23/2004		Nicolas Popp		026970-002500US			6185	
TITLE OF INVENTION: TOKEN PROVISIONING									
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DI	UE P	PREV. PAID ISSUE	FEE	TOTAL FEE(S) DUE	DATE DUE '	
nonprovisional	NO	\$1510	\$300		\$0		\$1810	05/11/2009	
EXAM	INER	ART UNIT	CLASS-SUBCLASS						
SIMITOSKI, MICHAEL J		2434	380-273000					•	
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the names of up or agents OR, alter (2) the name of a s registered attorney 2 registered patent listed, no name will	or printing on the patent front page, list the names of up to 3 registered patent attorneys gents OR, alternatively, the name of a single firm (having as a member a stered attorney or agent) and the names of up to gistered patent attorneys or agents. If no name is d, no name will be printed. Townsend and Townsend and Crew LLP 2 3 3					
PLEASE NOTE: Unle recordation as set forth (A) NAME OF ASSIC	ess an assignee is ident h in 37 CFR 3.11. Comp	THE PATENT (print or type) data will appear on the patent. If an assignee is identified below, the document has been filed for a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) Mountain View, California							
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🖾 Corporation or other private group entity 🔲 Government									
4a. The following fee(s) are submitted: ☐ Issue Fee ☐ Publication Fee (No small entity discount permitted) ☐ Advance Order - # of Copies			 ib. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 20-1430 (enclose an extra copy of this form). 						
5. Change In Entity Stat	tus (from status indicated	i above)							
a. Applicant claims	SMALL ENTITY State	s. See 37 CFR 1.27.	☐ b. Applicant is no						
NOTE: The Issue Fee and	d Publication Fee (if req	uired) will not be accepted	ed from anyone other the Office.	an the	e applicant; a regis	tered a	ittomey or agent; or th	ne assignce or other party in	
					Date	Ma	y 8, 2009		
Typed or printed name	Jame	S E. Gollada	ay		Registration N	o	58,182		
This collection of informan application. Confident submitting the completed this form and/or suggesti Box 1450, Alexandria, V Alexandria, Virginia 223	ation is required by 37 C itality is governed by 35 I application form to the ons for reducing this bu iriginia 22313-1450. DC 13-1450.	FR 1.311. The informati U.S.C. 122 and 37 CFR USPTO. Time will vary den, should be sent to the O NOT SEND FEES OR persons are required to re	on is required to obtain 1.14. This collection is y depending upon the inc Chief Information O COMPLETED FORM					d by the USPTO to process) ag gathering, preparing, and me you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450, number.	